Social Work

Sociology

Psychology

SUPPLEMENTAL FORM FOR CORRECTIONAL SERVICES TRAINEE AND PROBATION AND PAROLE OFFICER I

GENERAL INSTRUCTIONS: Please fill-out this supplemental application accurately and completely and return it to the Division of Personnel. The information provided will be used in conjunction with your application for state employment and college transcripts to evaluate your education and experience for Correctional Services Trainee and Probation and Parole Officer I. Inaccurate or incomplete information and a delay in returning this supplemental form will delay the processing of your application. Please enclose your college transcript(s) if you have not recently provided your transcripts to the Division of Personnel. 1. PRACTICUM OR INTERNSHIP List below any practicum or internship for which you received college credit. List the name of the sponsoring college or university, the name and location of the employer or organization the internship or practicum was with, a brief description of the type of practicum or internship and duties performed, and the client or population group you worked with in the space provided. **Sponsoring University or College:** List the type of practicum/internship and briefly describe duties and client or population group that you worked with. Name and Location of Employer or Organization where practicum/internship served: Hours Per Week: Total Weeks: List the type of practicum/internship and briefly describe duties and client or **Sponsoring University or College:** population group that you worked with. Name and Location of Employer or Organization where practicum/internship served: Hours Per Week: Total Weeks: **Sponsoring University or College:** List the type of practicum/internship and briefly describe duties and client or population group that you worked with. Name and Location of Employer or Organization where practicum/internship served: Hours Per Week: Total Weeks: 2. UNDERGRADUATE AND GRADUATE COLLEGE Indicate the number of undergraduate and graduate college semester or quarter hours that you successfully completed in the following areas listed below. (Include only SPECIFIC courses in each area. DO NOT include general education or unrelated coursework. DO NOT count any course in more than one area. If any course falls into more than one discipline area, then count it only in the most related area.) UNDERGRADUATE **GRADUATE** SEMESTER QUARTER SEMESTER QUARTER DISCIPLINE AREAS **HOURS HOURS HOURS HOURS** Criminal Justice, Corrections and Criminology Law Enforcement

| your application for Correctional Services Trainee. In the appropriate spaces below, please list name and address of employer(s), dates of employment, hours worked per week, job title(s), and description of duties performed and percent of time spent on each duty. DO NOT include any practicum or internship in this section of the supplemental application. | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Employer Name: | Job Title, Description of Duties, and Percent of Time Spent on Each Duty Weekly. |
| Address: | |
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| | |
| Dates of Employment | |
| From To Month and Year Month and Year | |
| Average Hours Worked Per Week: | |
| Employer Name: | Job Title, Description of Duties, and Percent of Time Spent on Each Duty Weekly. |
| Address: | |
| | |
| | |
| Dates of Employment | |
| From To | |
| Month and Year Month and Year | |
| Average Hours Worked Per Week: | |
| Employer Name: | Job Title, Description of Duties, and Percent of Time Spent on Each Duty Weekly. |
| Address: | |
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| Dates of Employment | |
| From To | |
| Month and Year Month and Year | |
| Average Hours Worked Per Week: | |
| Employer Name: | Job Title, Description of Duties, and Percent of Time Spent on Each Duty Weekly. |
| Address: | |
| | |
| | |
| Dates of Employment | |
| From To | |
| Month and Year Month and Year | |
| Average Hours Worked Per Week: | |
| knowledge and contains no willful misrepresentations such misrepresentation or falsification as to material and I will be dismissed from the service. | e on this supplemental application is true and complete to the best of my sor falsifications. I am aware that should an investigation at any time disclose any fact, my application will be rejected; my name will be removed from the register, |
| Date | Signature |

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